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<b>SERIAL NUMBER</b> 09/900,713	<b>FILING OR 371(c) DATE</b> 07/05/2001 <b>RULE</b>	<b>CLASS</b> 359	<b>GROUP ART UNIT</b> 2872	<b>ATTORNEY DOCKET NO.</b> 15436.249.30.1
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## APPLICANTS

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*ROS*  
 \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/240,441 10/13/2000

*ROS*  
 \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*ROS*  
 IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 08/22/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 6	TOTAL CLAIMS <del>34</del>	INDEPENDENT CLAIMS <del>4</del>
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <u>R.D. SHAFER</u> Initials				

## ADDRESS

22913

## TITLE

Optical isolator with reduced insertion loss and minimized polarization mode dispersion

<b>FILING FEE RECEIVED</b> 2440	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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